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CARDIOVASCULAR

APPENDIX TABLES

TABLE A6.—*Coronary heart disease morbidity and mortality—retrospective studies*(Actual number of cases shown in parentheses)¹

[SM = Smokers]

NS = Nonsmokers

EX = Ex-smokers]

Author, year, country, reference	Number and type of population	Data collection	Cases (percent)				Controls (percent)				Comments			
English et al., 1940, U.S.A. (60).	1,000 males with manifest CHD, 40 years of age. Cont: Is: 1,000 male non-CHD patients.	Case selection from Mayo Foundation files. Controls same year of admis- sion age- matched.	<i>Percent Smokers</i>				<i>Percent Smokers</i>							
			40-49	79.7 (187)			61.9 (302) (p<0.001)							
			50-59	71.7 (382)			73.9 (371) (not significant)							
			60 or over	63.8 (431)			61.8 (327) (not significant)							
			All ages	69.8			66.3 (p<0.05)							
Mills and Porter, 1957, U.S.A. (131).	474 white male coronary deaths. Controls: 606 white males.	Undefined.	40-49	(56)	50-59	(135)	60-69	(153)	70 or over	(130)	40-49	50-59	60-69	70 or over
			NS	7.14	6.66	18.30	33.84	19.91	24.47	35.09	54.12			
			All cigarettes	83.93	82.23	49.02	18.44	70.83	59.94	43.86	16.47			
			Pipes, cigars	8.93	11.11	32.68	47.70	9.26	16.47	21.05	29.41			
Buechley et al., 1958, U.S.A. (33).	Males reporting CHD to California Health Survey with matched controls from same survey (included those surviving first myocardial infarction).	Question- naire and interview.	NS	20.4 (23)			NS	42.1 (51)						
			≤20	61.1 (69)			≤20	46.3 (56)						
			>20	18.5 (21)			>20	11.6 (14)						

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TABLE A6.—*Coronary heart disease morbidity and mortality—retrospective studies (cont.)*
(Actual number of cases shown in parentheses)¹

Author, year, country, reference	Number and type of population	Data collection	Cases (percent)	Controls (percent)	Comments
Russek and Zohman, 1968, U.S.A. (163).	97 male and 3 female coronary patients. Controls: 100 healthy controls of similar age, sex, occupation, and ethnic origin.	Interviews by authors.	Tobacco usage>30 cigarettes/day 70 percent.	35 percent.	Patients included 89 with classical myocardial infarction and 11 with angina pectoris.
Spain and Nathan, 1961, U.S.A. (176).	269 males identified as having CHD by physical examination and history. Controls: 2,637/3,000 males identified as not having CHD	3,000 males in New York City viewed and examined by medical group.	NS 30.0 (81) <40/day 29.0 (78) >40/day 13.0 (33) EX 14.0 (39) Cigar, pipe 14.0 (38) Total 100.0 (269)	29.0 (772) 33.0 (870) 9.0 (234) (p<0.05) 14.0 (361) 15.0 (400) 100.0 (2,637)	
Mulcahy and Hickey, 1967 Ireland (185, 186).	400 men's less than 60 years of age with classical CHD. Data compared with male population con- sumption figures.	Interview.	Males NS 4.50 (18) SM 90.75 (363) EX 4.75 (19) Total 100.00 (400)	Males 18.2 (110) 70.6 (427) 11.2 (68) 100.0 (605)	Control smoking data obtained from estimated smoking habits of Irish population of same age group.
Schwartz et al., 1966, France (169).	612 male patients with angina or myocardial infarction. 612 age-matched controls.	Interview, laboratory, and clinical ex- aminations. Inhalers	Average amount per day as cigarettes 18.6 All SM 86.0 Inhalers 59.0	15.5 (p<0.0001) 86.0 45.0 (p<0.00001)	Data apply only to those under 55 years of age.

Author, year, country, reference	Number and type of population	Data collection	Cases (percent)		Controls (percent)		Comments	
			Males (72)	Females (28)	Males (72)	Females (28)		
Villiger and Heyden-Stucky, 1966, Switzer-land (201).	100 cases with recent myocardial infarctions. 72 males, 28 females, 100 age-matched controls (72 male industrial employees and 28 females in hospital for other diagnoses).	Hospital history or interview.	NS Cigarettes 1-19 cigarettes/day >20	6.94 66.7 18.1 .48.6	71.4 28.6 10.7 17.9	†25.0 45.8 23.6 †22.2	82.1 14.3 10.7 3.6	These are not pure smoking classes. † (p<0.01)
Dörken, 1967, Germany (52).	205 males up to 44 years of age with myocardial infarction or sudden death (139 deceased, 66 living). Controls—Hamburg age-matched citizens selected randomly.	Death certificate review. Interview of patient or kin.	NS <i>Cigarette Units</i> 1-5 10-15 20-30 >35	1.0 (2) 1.5 (3) .32.2 (62) .43.5 (84) .21.8 (42) 100.0 (193)	18.4 (76) 10.4 (43) 46.5 (192) 22.5 (93) 2.2 (9) 100.0 (413)	(only 28 were mixed or cigar smokers)	(62 were mixed or cigar smokers)	Ex-smokers listed under nonsmokers. Smoking information available only on 193/205. These cigarette categories include mixed or cigar smokers recalculated as to number of cigarettes. No patients or controls smoked pipes exclusively.
Dörken, 1967, Germany (53).	33 females up to 44 years of age with myocardial infarction or sudden death. Controls—133 females 27-44 years of age from clinic without CVD or lung cancer.	Death certificates, interviews.	<i>Cigarettes per day</i> 0 1-5 6-15 20-30 >35	6.1 (2) 1.548.5 (16) .39.4 (13) 6.1 (2)	63.2 (84) (p<0.001) 17.3 (23) 16.5 (22) 3.0 (4) ...			

TABLE A6.—*Coronary heart disease morbidity and mortality—retrospective studies (cont.)*(Actual number of cases shown in parentheses)¹

[SM = Smokers NS = Nonsmokers EX = Ex-smokers]

Author, year, country, reference	Number and type of population	Data collection	Cases (percent)	Controls (percent)	Comments
Hyams et al., 1967, Japan (87).	79 males surviving myocardial infarc- tion. 157 age- matched controls hospitalized for non- CVD but include hypertensive disease.	Interviews by trained personnel.	NS 10.1 (8) 1-9 cigarettes per day 7.0 (5) 10-15 25.4 (18) 16-20 35.2 (25) 21-34 22.5 (16) >35 9.9 (7) All SM 100.0 (71)	21.0 (33) 10.5 (13) 33.9 (42) 25.8 (32) 17.7 (22) 12.1 (15) 100.0 (124)	
Mulcahy et al., 1967, Ireland (137).	100 female patients less than 60 years of age admitted to hospital with CHD.	Hospital interviews.	SM 62.0 (63) NS 33.0 (33) EX 4.0 (4) Total 100.0 (100)	45.6 (261) 45.3 (259) 9.1 (52) 100.0 (572)	Smoking on controls obtained from statistics of smoking in Irish Republic. Sudden death not included.
Steifel, 1967, Poland (179).	70 male and female patients with recent onset exertional angina pectoris, 54 controls of same age.	Direct interviews.	<i>Prevalence of risk factors</i> <i>Angina patients</i> 60.0	Control group 48.1 (p>0.1)	Authors then followed the 70 patients for 3 years and noted that smoking signifi- cantly influenced the incidence of coronary occlusion.
Schimmler et al., 1968, Germany (167).	503 males with healed myocardial infarctions. 714 male controls of same age without detectable heart disease.	Hospital interviews.	NS 9.0 (44) EX 12.0 (59) Cigar, pipe 12.0 (62) <19 cigarettes 25.0 (129) >20 42.0 (209) Total 100.0 (503)	26.0 (187) (p<0.001) 20.0 (142) (p<0.001) 11.0 (77) 14.0 (101) (p<0.001) 29.0 (207) (p<0.001) 100.0 (714)	

TABLE A6.—*Coronary heart disease morbidity and mortality—retrospective studies (cont.)*(Actual number of cases shown in parentheses)¹

[SM = Smokers]

NS = Nonsmokers

EX = Ex-smokers]

Author, year, country, reference	Number and type of population	Data collection	Cases (percent)	Controls (percent)	Comments
Hood et al., 1969, Sweden (85).	230 males surviving early first myocardial infarction. Controls: 855 randomly selected males 50 years of age.	Interview and exam- ination.	(230) Never smoked 1.75 EX before infarction 1.75 EX after infarction 29.1 <15 cigarettes ... 28.3 >15 cigarettes ... 22.6 All 80.0 Pipe 16.5	(855) 24.2 19.7 .. 27.4 20.0 47.4 8.8	
Jouve et al., 1969, France (91).	1,229 CHD patients; 802 males, 427 females. Controls: 743 individuals of both sexes; age, sex, and social class matched.	Interview.	43.0	13.0 (p<0.0001)	
Kastl, 1969, Germany (98).	275 male railway employees up to 65 years of age sur- viving myocardial infarction. 275 con- trol employees with minor circulatory disturbances.	Interview and ex- amina- tion.	NS 20.0 (55) 2-20 cigarettes or up to 6 cigars. .. 32.0 (88) >20 cigarettes or >6 cigars. 48.0 (132)	29.8 (82) 63.3 (82) 6.9 (19)	

¹ Unless otherwise specified, disparities between the total number of cases and the sum of the individual smoking categories are due to the exclusion of either occasional, miscellaneous, mixed, or ex-smokers.

TABLE A7.—*Differences in serum lipids between smokers and nonsmokers*

(Actual number of individuals shown in parentheses)¹
 [SM = Smokers NS = Nonsmokers]

Author, year, country, reference	Number and type of population	Results			Comments	
Gofman et al., 1955, U.S.A. (72).	401 male employees 20-59 years of age.	Lipid: tSF 0-12 Sf 12-20 Sf 20-100 Sf 100-400 Cholesterol	Ages 20-29 (NS 55, SM 37) +59.9 p<0.001 + 9.4 p<0.001 +20.0 p<0.025 +15.8 p<0.025 +21.2 p<0.05	Ages 30-39 (NS 56, SM 67) +19.9 p<0.05 + 5.4 p<0.05 + 9.1 p<0.05 +12.1 p<0.05 + 9.0 p<0.05	Ages 40-59 (NS 17, SM 44) + 3.9 p<0.05 - 3.5 p<0.05 + 8.5 p<0.05 - 4.5 p<0.05 - 4.8 p<0.05	tSF refers to Svedberg flotation units of centrifuged lipoproteins.
Thomas, 1958, U.S.A. (185).	521 medical students.			Serum cholesterol mg. percent NS (264) SM (257) Observed/Expected Observed/Expected		
		<250	170/157	149/161.6		
		>250	87/99.6	115/102.4		
		Chi Square Value = 5.2 p<0.025				
Dawber et al., 1959, U.S.A. (47).	2,253 males participating in the Framingham study 29-59 years of age.	NS All cigarettes <10 10-19 20-39 >40 Pipe and cigar		Serum cholesterol mg. percent 29-44 45-59 216.1(149) 228.3(131) 224.8(874) 229.5(589) 217.4 (75) 229.1 (76) 221.1(134) 230.1 (95) 225.8(551) 227.8(350) 229.0(114) 238.5 (68) 214.9(128) 227.1(166)	The authors conclude that there is evidence of a gradient of cholesterol with increasing amount of cigarette smoking in younger men.	
Karvonen et al., 1959, Finland (97).	525 males in various occupations 20-59 years of age.	NS SM		Serum cholesterol mg. percent West Finland East Finland Helsinki 208.0(64) 226.6 (39) 235.1 (62) 228.7(91) 249.7(103) 257.8(166)	The authors state that no trend was noted associating increasing amount smoked with increasing serum cholesterol, although smokers and nonsmokers did have different overall levels.	

TABLE A7.—*Differences in serum lipids between smokers and nonsmokers (cont.)*(Actual number of individuals shown in parentheses)[†]

[SM = Smokers NS = Nonsmokers]

Author, year, country, reference	Number and type of population	Results						Comments	
		Mean serum cholesterol mg. percent			Mean Beta/Alpha lipoprotein ratio				
Acheson and Jessop, 1961 Ireland (1).	221 randomly chosen pensioners 65-85 years of age. 5 cigarettes/day 10 20 >30	NS			214(38) 201(12) 213(34) 201(33) 206 (8)			2.0(36) 2.1(11) 1.9(33) 1.9(35) 1.8 (8)	
		Cholesterol mg. percent			Beta/Alpha lipoprotein ratio			No data given on numbers in each group. †A—African. ‡E—European.	
		25-39	40-55	A E	25-39	40-55	A E		
		†A ‡E	A E	A E	A E	A E	A E		
		NS	179 197	222 246	2.89 3.34	3.75 4.59	3.75 4.59		
Bronte- Stewart, 1961, South Africa (31).	Approximately 600 healthy males 25-55 years of age. "Heavy" SM . .	186 223			3.82 4.40			No data given on numbers in each group. †A—African. ‡E—European.	
		204 236			4.07 5.40				
Konttinen, 1962, Finland (19).	314 male military recruits 18-25 years of age. NS (Cigarettes per day) 1-10 (53). 11-19 >20	Serum cholesterol mg. percent			Serum phospholipids mg. percent			No serum lipid differences found among the various smoking groups.	
		(145)			203.8 218.0				
		206.8 222.3			213.1 224.7				
		(54)			202.3 210.5				
		(62)							
Blomstrand and Lundman, 1966, Sweden (26).	76 monozygotic twin pairs and 87 dizygotic twin pairs obtained from Swedish Twin Registry.	I. Monozygotes discordant for smoking: Smokers showed slightly lower levels of cholesterol, triglycerides, and phospholipids than nonsmokers. II. Dizygotes discordant for smoking: Smokers showed significantly higher levels of phospholipids. No differences for cholesterol and triglycerides.						The authors conclude from the differing MZ and DZ results that constitutional factors are probably more important than smoking in determining lipid levels.	

TABLE A7.—*Differences in serum lipids between smokers and nonsmokers (cont.)*
 (Actual number of individuals shown in parentheses)¹
 [SM = Smokers NS = Nonsmokers]

Author, year, country, reference	Number and type of population	Results				Comments
Fidanza et al., 1966, Italy (62).	111 male prisoners 34-69 years of age.		Serum cholesterol mg. percent			No statistically significant differences found between SM and NS.
	NS	195 (12)	189 (10)	176 (7)	
	<20 cigarettes/day	208 (5)	201 (16)	202 (13)	195 (10)	
	>20 cigarettes/day	197 (5)	175 (7)	171 (7)	..	
			Serum triglycerides mg. percent			
	NS	84.7	71.9	85.0	
	<20 cigarettes/day	84.5	99.4	101.9	89.8	
	>20 cigarettes/day	91.0	86.0	65.7	..	
Kedra and Dmowski, 1966, Poland (99).	200 clinically healthy males 20-50 years of age.	Serum cholesterol mg. percent	Phospholipids mg. percent	Total lipids mg. percent		Serum cholesterol also noted to increase with increasing intensity and duration of smoking.
	NS (100)	170.2	268.1	1,234.8		
	SM 100)	224.9	{ p<0.01	{ 257.5	{ p>0.05	
					{ 1,362.1	{ p<0.01
			Beta-lipoproteins			
			Total fatty acids mg. percent	percent of total lipoproteins		
	NS (100)	797.8	{ 43.1	{		
	SM 100)	869.9	{ p<0.01	{ 49.9	{ p<0.01	
Harlan et al., 1967, U.S.A. (79).	657 former naval aviation cadets 48 years of age (average).	Serum cholesterol Found to be related to cigarette smoking p<0.05.	Serum triglycerides Found not to be related to cigarette smoking.	Lipoproteins		
				Sf 0-12 related, p<0.05		
				Sf 20-100 unrelated.		
				Sf 100-400 unrelated.		
Heyden- Stucky and Schibler- Reich, 1967, Switzerland (82).	500 plant workers 30-60 years of age.	Serum cholesterol mg. percent	Serum triglycerides mg. percent		No statistically significant difference found between SM and NS.	
	<10 cigarettes/day	210.0 (334)	110.0			
	>10 cigarettes/day	260.0 (166)	180.0			